

March 15, 2022

The Honorable Matt Lesser, Co-Chair  
The Honorable Kerry Wood, Co-Chair  
The Honorable Tony Hwang, Ranking Member  
The Honorable Cara Pavalock-D'Amato, Ranking Member Insurance and Real Estate  
Committee  
Connecticut General Assembly  
Legislative Office Building, Room 2700  
Hartford, CT 06106

RE: SB 360: An Act Concerning Various Changes to Utilization Review Companies Licensure  
Statute and HB 5391: An Act Concerning Mental Health.

Chairman Lesser, Chairwoman Wood, Vice Chairman Anwar, Vice Chairwoman Comey,  
Ranking Members Hwang and Pavalock-D'Amato and members of the Housing Committee:

My name is Nicole Scrivano I am a Licensed Marriage and Family Therapist (LMFT), an  
AASECT Certified Sex Therapist, and a group private practice owner.

I am a resident of West Hartford, CT and I practice in West Hartford, CT. I am writing in support  
of SB 360 and HB 5391, with requested modifications to take into consideration below stated  
private insurance barriers and obstacles to Mental Health Providers in Connecticut.

Marriage and Family Therapists are employed in various clinical settings throughout the state,  
serving diverse mental health needs. Marriage and family therapists are specifically trained  
through a systemic lens and have extensive training in treating individuals, couples, families and  
systems as problems arise. Additionally, many MFTs are in network with the various private  
insurance carriers that operate in our state.

Many providers are at full capacity and have waiting lists for new clients. Our private practice  
waitlist can be up to 100. Providers like me, who are well-connected, are noticing that the  
referral options are full and have waitlists. Many higher levels of care facilities are at capacity  
and have extensive waitlists; placing outpatient providers in a difficult situation to manage  
higher level needs in less time and inappropriate settings. You may notice that school systems  
are experiencing the spill over of untreated mental health disorders of their students within their  
school settings and environments.

We as mental health providers are doing all we can to address this crisis. Many MFTs in private  
practice do not have administrative support or limited administrative support. As a result,  
administrative burdens erected by private insurance companies place a significant burden on our  
profession. These barriers include: ever changing claim submission procedures; lengthy waits for  
service reimbursement; audits; **claw-backs of previous payments and erroneous claim  
denials.**

These issues are driving mental health providers to remove themselves from provider networks. If you check in 2021, you will see hundreds of LMFTs, LCSWs, and APRNs dropping Anthem BCBS as an option due to low reimbursement rates and lengthy wait times for reimbursement.

Those providers that choose to stay in-network are bogged down by time consuming paperwork and phone calls that could otherwise be used servicing Connecticut residents in need of mental health treatment. Similarly, those who stay paneled deal with getting reimbursed less for couples or family therapy, which is more difficult to perform. Claim submission, timely denials due to covid errors, and processing problems, paneling issues, clawbacks/audits, and low reimbursement all contribute to my desire, and other providers desire, to not be paneled.

I ask that the utilization review requests outlined in SB 360 be capped; as to eliminate undue repeated auditing/review for providers and creating time consuming paperwork burdens that continue to impede the ability to treat clients. Similarly, having timely denials during a pandemic is unprecedented. I request that the study referenced in HB 5391 be carried-out by an independent task force that has representation from the Department of Insurance, (DOI) yet not conducted by the Department. That is unfair and unjust.

I ask that you utilize the task force outlined to review and recommend adjustments to private insurance regulations to reduce barriers and support private practitioners and mental health agencies. As stated in 2/25/22 hearing, Yale psychiatrist even reported that what is keeping therapists (LCSWs) from staying is the low reimbursement rates.

I also recommend that the taskforce consider the following topics to review and provide recommendations on:

- Improved communication between providers and insurance representatives through regular updates to insurance panel lists of in-network providers.
- The development of systems and protocols that decrease claim processing times through standardization efforts for claims pending in “accepted” or “processing” status for extended periods of time. Systems and protocols should reduce errors and inaccurate denials of payment of claims. No need to have timely denials or clawbacks during a global pandemic.
- Creating clear guidelines for claim processing code adjustments, with advance notice to providers, and implementation of code changes after insurance systems are updated. Providing therapists with INFORMED consent of how much they will get paid and how to submit claims.
- Requiring standardized and regulated claim auditing protocols to reduce provider audits and monetary claw-backs from providers.

I urge you to support SB 360, with the addition of an appropriate cap of reviews as to not impede providers time and resources to treating clients. I urge you to support the establishment of a taskforce as outlined in HB 5391, with the above mentioned areas of consideration. The requested changes will reduce barriers for mental health providers and help improve access to mental health services for all Connecticut residents.

Similarly, add MFTs with masters and professional counselors with masters in addition to LMSWs to work and get reimbursed in private practice in the state of Connecticut.

Thank you for your time on this important matter. It is urgent, as evidenced by waitlists, suicide rate, homicide rate, etc.

Sincerely,  
Nicole Scrivano, LMFT